ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		65055	5 /11/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected N .... Non-elected
= .... Allowed I .... Interference
− (Through numeral)... Canceled A .... Appeal
÷ .... Restricted O .... Objected

Claim		Date
Final	Original	
	1	✔
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	4	✔
	5	✔
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Claim		Date
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Claim		Date
Final	Original	
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If more than 150 claims or 10 actions
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Best Available Copy